

COMPLIANCE CHECKLIST**► Rehabilitation Therapy Department**

The following Checklist is for plan review of hospital facilities, and is derived from the AIA/HHS Guidelines for Design and Construction of Hospital and Health Care Facilities, 2001 Edition (specific sections indicated below), appropriately modified to respond to DPH requirements for projects in Massachusetts which include Hospital Licensure Regulations 105 CMR 130.000. Applicants must verify project compliance with all the requirements of the Guidelines, Licensure Regulations & Policies when filling out this Checklist, and must include the DPH Affidavit when submitting project documents for self-certification or abbreviated review.

Other jurisdictions, regulations and codes may have additional requirements which are not included in this checklist, such as:

- NFPA 101 Life Safety Code and applicable related standards contained in the appendices of the Code.
- 708 CMR, the State Building Code.
- Joint Commission on the Accreditation of Health Care Organizations.
- CDC Guidelines for Preventing the Transmission of Mycobacterium Tuberculosis in Health Care Facilities.
- Accessibility Guidelines of the Americans with Disabilities Act (ADA).
- Architectural Access Board.
- Local Authorities having jurisdiction.

Instructions:

1. The Checklist must be filled out completely with each application.
2. Each requirement line (____) of this Checklist must be filled in with one of the following codes, unless otherwise directed. If an entire Checklist section is affected by a renovation project, "E" for existing conditions may be indicated on the requirement line (____) next to the section title (e.g. E PATIENT ROOMS). If more than one space serves a given required function (e.g. patient room or exam room), two codes separated by a slash may be used (e.g. "E/X"). Clarification should be provided in that regard in the Project Narrative.

X = Requirement is met.

☒ = Check this box under selected checklist section titles or individual requirements for services that are not included in the project.

E = Functional space or area is existing and not affected by the construction project; this category does not apply if the existing space or area will serve a new or relocated service or if the facility is currently not licensed & applying for licensure.

W = Waiver requested for Guidelines, Regulation or Policy requirement that is not met (for each waiver request, complete separate waiver form & list the requirement ref. # on the affidavit).

3. Mechanical, plumbing and electrical requirements are only partially mentioned in this checklist.
4. Oxygen, vacuum & medical air outlets are identified respectively by the abbreviations "OX", "VAC" & "MA".
5. Items in *italic*, if included, refer to selected recommendations of the Appendix of the Guidelines, adopted by policy.
6. Requirements referred to as "Policies" are DPH interpretations of the AIA Guidelines or of the Regulations.

Facility Name:

Dates:

.....

Initial:

Facility Address:

Revisions:

.....

Satellite Name: (if applicable)

DON Identification: (if applicable)

.....

Satellite Address: (if applicable)

.....

Project Reference:

Building/Floor Location:

.....

.....

ARCHITECTURAL REQUIREMENTS**MECHANICAL/PLUMBING/
ELECTRICAL REQUIREMENTS**7.13.B COMMON ELEMENTS

- 7.13.B1 ☐ Office & clerical space
☐ provision for filing & retrieval of patient records
- 7.13.B2 ☐ Reception & control station
☐ visual control of waiting & treatment areas
- 7.13.B3 ☐ Patient waiting area
☐ out of traffic
☐ space for wheelchair waiting
- 7.13.B4 ☐ Patient toilet rooms
☐ wheelchair accessible
- 7.13.B5 ☐ Storage space for wheelchairs & stretchers
☐ out of traffic
- 7.13.B6 ☐ Housekeeping room
☐ conveniently accessible
- 7.13.B7 ☐ Lockable storage for staff personal effects
- 7.13.B8 ☐ Convenient access to staff toilets & lockers
- 7.13.B9 ☐ Access to a conference/demonstration room

- ☐ Handwashing station
☐ Vent. min. 10 air ch./hr (exhaust)

- ☐ Service sink
☐ Vent. min. 10 air ch./hr (exhaust)

7.13.C PHYSICAL THERAPY

- ☐ check if service not included in project
- 7.13.C1 ☐ Individual treatment areas
☐ check if service not included in project
☐ privacy curtains
☐ min. 70 sf
- 9.2.B1 ☐ PT treatment rooms
☐ check if service not included in project
☐ min. 80 sf
- 7.13.C3 ☐ Exercise area & facilities
- 7.13.C4 ☐ Clean linen & towel storage
- 7.13.C5 ☐ Storage for equipment & supplies

- ☐ Handwashing stations
☐ Vent. min. 6 air ch./hr

- ☐ Handwashing station
☐ Vent. min. 6 air ch./hr

- ☐ Vent. 6 air ch./hr
☐ Vent. 2 air ch./hr

- 7.13.C6 ☐ Soiled holding room
☐ Handwashing station (policy)
☐ within soiled holding room
or
☐ immediately adjacent to
soiled holding room
☐ Vent. min. 10 air ch./hr (exhaust)

- 7.13.C7 ☐ Patient dressing areas & lockers
☐ handicapped accessible
- ☐ Patient shower **or** ☐ Patient shower not
required by functional required by functional
program program
☐ patient shower rm
☐ handicapped
accessible

- ☐ Vent. 10 air ch./hr (exhaust)

ARCHITECTURAL REQUIREMENTS

- 7.13.D OCCUPATIONAL THERAPY
☐ check if service not included in project
- 7.13.D1 ___ Wheelchair accessible work areas and counters
- 7.13.D3 ___ Storage for equipment and supplies
- 7.13.D4 ___ Area for activities of daily living
___ space for bed table & chair
___ kitchen counter with appliances & sink
___ bathroom
- 7.13.E PROSTHETICS AND ORTHOTICS
☐ check if service not included in project
- 7.13.E1 ___ Workspace for technicians
- 7.13.E2 ___ Space for evaluating and fitting
___ Provisions for privacy
- 7.13.E3 ___ Space for equipment, supplies & storage
- 7.13.F SPEECH AND HEARING
☐ check if service not included in project
- 7.13.F1 ___ Space for evaluation and treatment
___ Space for equipment & storage

**MECHANICAL/PLUMBING/
ELECTRICAL REQUIREMENTS**

___ Handwashing station

___ Vent. min. 6 air ch./hr

GENERAL STANDARDSDetails and Finishes

Inpatient corridors

- | | |
|---|--|
| <input type="checkbox"/> New/Extensive Construction
<input type="checkbox"/> min. corridor width 8'-0"
(NFPA 101) | <input type="checkbox"/> Limited Renovations
<input type="checkbox"/> corridor width
unchanged or
increased |
|---|--|

Staff corridors

- ☐
- min. corridor width 5'-0" (7.28.A2)

- ☐
- Fixed & portable equipment recessed does not reduce required corridor width (7.28.A3)

- ☐
- Work alcoves include standing space that does not interfere with corridor width

☐ check if function not included in project

Doors (7.28.A4-A8):

- ☐
- doors to rooms used for stretchers or wheelchairs
-
- min. 2'-10" wide
-
- ☐
- all doors are swing-type
-
- ☐
- outswinging/double-acting doors for toilet rooms
-
- ☐
- outsw./double-acting doors for bathing or privacy
-
- curtains off separate bathing suite
-
- ☐
- doors do not swing into corridor

- ☐
- Operable windows (7.28.A9-A10):

- ☐
- check if all windows are fixed
-
- ☐
- window operation prohibits escape or suicide
-
- ☐
- insect screens

- ☐
- Glazing (7.28.A11):

- ☐
- safety glazing or no glazing under 60" AFF &
-
- within 12" of door jamb
-
- ☐
- safety glazing or no glazing in exercise rooms
-
- ☐
- safety glazing (or curtains) in shower & bath
-
- enclosures

- ☐
- Thresholds & exp. joints flush with floor surface

- ☐
- Grab bars in all patient toilets & bathing facilities

- ☐
- 1½" wall clearance
-
- ☐
- 250 lb. capacity (7.28.A14)

- ☐
- Handwashing sinks anchored to withstand 250 lbs.

Vertical clearances (7.28.A20):

- ☐
- ceiling height min. 7'-10", except:
-
- ☐
- 7'-8" in corridors, toilet rooms, storage rooms
-
- ☐
- sufficient for ceiling mounted equipment
-
- min. clearance under suspended pipes/tracks:
-
- ☐
- 7'-0" AFF in bed/stretcher traffic areas
-
- ☐
- 6'-8" AFF in other areas

Floors (7.28.B4):

- ☐
- floors easily cleanable & wear-resistant
-
- ☐
- non-slip floors in wet areas
-
- ☐
- wet cleaned flooring resists detergents

Walls (7.28.B6):

- ☐
- wall finishes are washable
-
- ☐
- smooth/water-resist. finishes at plumbing fixtures

Mechanical (7.31.D)

- ☐
- Mech. ventilation provided per Table 7.2
-
- ☐
- Exhaust fans located at discharge end
-
- ☐
- Fresh air intakes located at least 25 ft from exhaust
-
- outlet or other source of noxious fumes
-
- ☐
- Contaminated exhaust outlets located above roof
-
- ☐
- Ventilation openings at least 3" above floor
-
- ☐
- Central HVAC system filters provided per Table 7.3

Plumbing (7.31.E)

Handwashing station equipment

- ☐
- handwashing sink
-
- ☐
- hot & cold water
-
- ☐
- single lever or wrist blades faucet
-
- ☐
- soap dispenser
-
- ☐
- hand drying facilities

Sink controls (7.31.E1):

- ☐
- hands-free controls at all handwashing sinks
-
- ☐
- blade handles max. 4½" long

- ☐
- Non-slip walking surface at tubs & showers

Electrical (7.32)

- ☐
- All occupied building areas shall have artificial lighting
-
- (7.32.D2)
-
- ☐
- Duplex, grounded receptacles max. 50 feet in corridors,
-
- max. 25 feet from end wall (7.32.E3)

- ☐
- Emergency power (7.32.H)

- ☐
- emergency power provided to all essential
-
- services complies with NFPA 99, NFPA 101 &
-
- NFPA 110
-
- ☐
- emergency power source provided with fuel
-
- capacity for continuous 24-hour operation